out to my satisfaction and have not yet determined whether the Edinburgh methods were original or whether, remembering how large a number of Scotch graduates came under the direct influence of the great Boerhaave and studied at Leyden, it was to Dutch influence that the advance was in the main due.

I did not realize how much we owe to Edinburgh in these matters until within the last few months, for it has been somewhat the custom to run down the Edinburgh teaching in medicine of the end of last century, and to regard that school as dominated by the abstract doctrines of Cullen. But a few weeks ago, looking through a collection of old manuscript notebooks we have in the library, my views about the Edinburgh teaching a century and more ago, underwent a complete change. For I happened there upon two notebooks of a certain John Rowand, the one of notes from Dr. Duncan's lectures on the practice of medicine taken down at Edinburgh in the season 1781-82, the other of cases treated in the clinical wards of the Edinburgh Hospital, 1780-2, with observations upon the cases by Dr. James Gregory and Dr. Francis Home, and it is this last which has been a revelation to me.

Clearly these are the carefully compiled notes of an Edinburgh medical student. I learn from a biography of Dr. Gregory in one of the London journals immediately after his death in 1822, that numerous notebooks of this nature were then in existence. Dr. Gregory's cases are of the period from November to March, 1780-1, Home's are of the following winter. There is a tendency to group together cases of the same nature occurring within a few weeks of each other, and preceding or more often following such groups of clinical cases there are clinical notes, and these contain references to the cases indicating that the writer had seen. them in the wards. In short, the volume gives evidence that in the year 1780, there was already well developed in Edinburgh a system in clinical instruction with full instruction in note-taking (the volume in question contains the full notes of some 60 cases), and then again clinical lectures upon these cases within the infirmary. Of course you must remember that this was long before the employment of any instruments of precision, save the finger tips; there could thus in these notes be no temperature chart, no reference to percussion and auscultation; in short, they are what even the young student must regard as being lacking in many respects. But so far as they go and so far as the period will permit, they strike me as being remarkably clear and remarkably well arranged. Indeed, we have in them the foundation of our modern method, and a very good and sound foundation it is.

I don't think it will tire you if I read out to you one or two of these cases with the notes that follow them.